

CLAIMS ONLY						Application Number 10/684410	Filing Date					
						Applicant(s)						
						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
1		/					51					
2		/	/				52					
3		/	/				53					
4			/				54					
5		/	/				55					
6			/				56					
7			/				57					
8			/				58					
9			/				59					
10			/				60					
11			/				61					
12			/				62					
13			/				63					
14			/				64					
15			/				65					
16			/				66					
17			/				67					
18			/				68					
19							69					
20							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep			6				Total Indep					
Total Depend			12				Total Depend					
Total Claims			18				Total Claims					